

PART B - FEE(S) TRANSMITTAL

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26712 7590 08/08/2005

HODGSON RUSS LLP - David L. Principe
ONE M & T PLAZA
SUITE 2000
BUFFALO, NY 14203-2391

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Janice Capuani

(Depositor's name)

Janice Capuani

(Signature)

September 13, 2005

(D)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/695,558	10/28/2003	Kent N. Johnson	40736.0001	9168

TITLE OF INVENTION: GONDOLA RAILCAR CONSTRUCTION

09/15/2005 CNGUYEN3 00000020 10695558

01 FC:2501	700.00	OP
02 FC:1504	300.00	OP
03 FC:8001	30.00	OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/08/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
LE, MARK T	3617	105-406100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hodgson Russ LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 08-2442 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

David L. Principe

Date September 12, 2005

Typed or printed name David L. Principe

Registration No. 39,336

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Effective on 12/08/2004 Fees pursuant to Consolidated Appropriations Act, 2005 (H.R. 4818)		<i>Complete if Known</i>	
		Application Number	10/695,558
FEE TRANSMITTAL For FY 2005		Filing Date	10/28/2003
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Kent N. Johnson
TOTAL AMOUNT OF PAYMENT (\$1,030.00)		Examiner Name	Mark T. Le
METHOD OF PAYMENT (check all that apply)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 08-2442		Deposit Account Name: Hodgson Russ LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEES CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	
<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Utility	300	150	500
Design	200	100	100
Plant	200	100	300
Reissue	300	150	500
Provisional	200	100	0
		EXAMINATION FEES	
		<u>Small Entity</u>	
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	200	100	100
Design	130	65	65
Plant	160	80	80
Reissue	600	300	300
Provisional	0	0	0
<u>Small Entity</u>			
<u>Fee (\$)</u>			
50 25			
200 100			
360 180			
2. EXCESS CLAIM FEES			
<u>Fee Description</u>			
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent			
50 25			
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent			
200 100			
Multiple dependent claims			
360 180			
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>
		-20 or HP = _____ x _____	= _____
		Fee (\$)	<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20			
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>
		-3 or HP = _____ x _____	= _____
HP = highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
<u>Total Sheets</u>		<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>
		- 100 = _____ / 50 = _____ (round up to a whole number)	x _____ = _____
		Fee (\$)	<u>Fee Paid (\$)</u>
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			
Other: Issue fee (\$700), Publication Fee (\$300) and 10 copies of patent (\$30.00)			
<u>Fees Paid (\$)</u>			
\$1,030.00			
SUBMITTED BY			
SIGNATURE			Registration No. 39,336 (Attorney/Agent)
NAME (Print/Type)	David L. Principe		Date September 13, 2005

I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on September 13, 2005.

Janice Capuani
Name

Janice Capuani
Signature

September 13, 2005
Date of Signature